INFORMATION REDACTED PURSUANT TOTHE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)



#### DESCRIPTION

Prevost Car (US) Inc. is recalling certain 2018 X3-45 coaches. On some vehicles, the center seatbelt buckle mounting cables were found frayed on passenger seats, exposing the cable strands.

This represents roughly half of the seating positions throughout the vehicle. Aisle side seating positions are unaffected.

Refer to instructions.

## MATERIAL

# 

Depending on the passenger seating of the vehicle, select one of three options A, B or C below.

A. 51 passenger seats

One (1) SR22-09-1

B. 55 passenger seats:

One (1) SR22-09-**1** and One (1) SR22-09-**2** 

C. 30 passenger seats:

Eight (8) kits SR22-09-2

#### Kit SR22-09-1

Part No. Description		Qty	
867842	BUCKLE FEMALE	26	
865519	NUT HEX NYRT 7/16-20	26	
868271	SCREW CAP HEX 7/16-20x1 1/4 G8	26	

#### Kit SR22-09-2

Part No.	Description	Qty
867842	BUCKLE FEMALE	2
865519	NUT HEX NYRT 7/16-20	2
868271	SCREW CAP HEX 7/16-20x1 1/4 G8	2

#### SAFETY PRECAUTIONS

- Eye protection should always be worn when working in a shop.
- Rules for Personal Protection Equipment should always be respected. Wear your PPE including but not limited to the following:



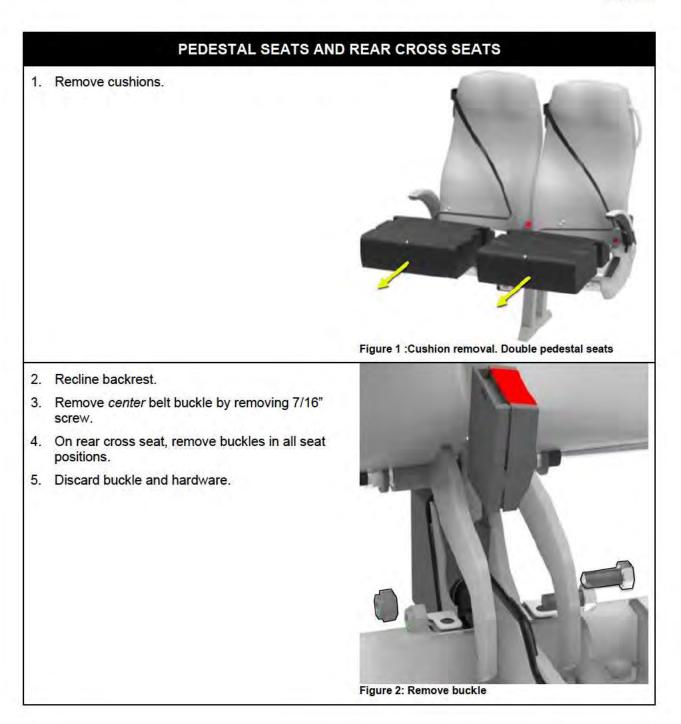
### PROCEDURE

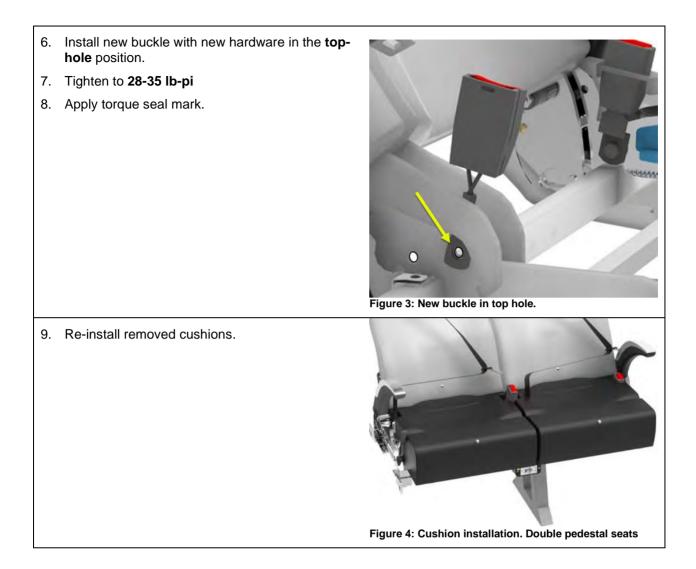


# DANGER

Park vehicle safely, apply parking brake, stop the engine. Prior to working on the vehicle, set the ignition switch to the OFF position and trip the main circuit breakers equipped with a trip button. On Commuter type vehicles, set the battery master switch (master cut-out) to the OFF position.

Lockout & Tag out (LOTO) must be performed during set-up, maintenance or repair activities. Refer to your local procedure for detailed information regarding the control of hazardous energy.





FLIP-UP SEATS, S	LIDING AND FIXED
10. Access buckle mounting point by widening the cushion gap.	e figure 5: Center buckle access
11. Remove buckle and hardware. Discard.	Figure 6: buckle removal
<ul> <li>12. Install new buckle with new hardware.</li> <li>13. Tighten to 28-35 lbf-pi</li> <li>14. Apply torque seal mark.</li> </ul>	
	Figure 7: Buckle installation

## PARTS DISPOSITION

DO NOT RETURN THE REPLACED PARTS. Discard waste according to applicable environmental regulations (Municipal/State[Prov.]/ Federal)

#### WARRANTY

This modification is covered by Prevost's normal warranty.

For 51 passenger vehicles, we will reimburse you the kit **A** (SR22-09-1) and six hours (6h) of labor upon receipt of a completed A.F.A.

For 55 passenger vehicles, we will reimburse you the kit combination A + B (SR22-09-1 + SR22-09-2) and seven hours (7h) of labor upon receipt of a completed A.F.A.

30 passenger vehicles will be reimbursed 8 kits **C** (SR22-09-2) and four hours (4h) of labor upon receipt of a completed A.F.A.

Please submit claim via our Online Warranty System, available at <u>www.prevostcar.com</u> (under service \ warranty section). Use Claim Type: "Bulletin/Recall" and select "Safety Recall SR22-09 ".

Should you only wish to close the safety recall (without reimbursement), fill-in the "Safety Recall Certification Sheet" provided with this bulletin and return it to our warranty department by Email at prevost.warranty@volvo.com.

## OTHER

VBC Bulletin	N/A
Fail Code	18.03-3
Defect Code	09
Syst.Cond	R
Causal Part	864349

Access all our Service Bulletins on <u>http://techpub.prevostcar.com/en/</u> or scan the QR-Code with your smart phone.

E-mail us at <u>technicalpublications prev@volvo.com</u> and type "ADD" in the subject to receive our warranty bulletins by e-mail.







# Safety Recall Certification Sheet (Ref: SR22-09)

VEHICLE SERIAL NUMBER:

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PERFORMED BY	OWNER/OPERATOR			
We hereby certify that Safety Recall Instructions with regard to Safety Recall SR22-09 have been performed.				
Name:	Name:			
Addr:	Addr:			
Phone:	Phone:			
Fax:	Fax:			
Signature : Date:	Signature : Date:			

If the information mentioned above is incorrect or you are not the owner of this vehicle anymore, please fill this section and return to sender.

NEW OWNER:			
BUSINESS:			
ADDRESS (including	County):		
	_		
	FAX:		

Please return this completed document with your A.F.A. form